

**NOTICE OF RESTITUTION**

Incident Date: \_\_\_\_\_ Housing Unit: \_\_\_\_\_

Youth's Name: \_\_\_\_\_ CLIENT ID #: \_\_\_\_\_

Violation: \_\_\_\_\_ Code No.: \_\_\_\_\_

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You have been charged and found guilty of a Code of Conduct Violation in which you damaged or destroyed property or security devices, escaped or attempted to escape from the custody of the facility, caused or attempted to cause injury to yourself or another person, or were found in possession of stolen items. You are being ordered to pay restitution for the cost of the stolen, damaged or destroyed property or security devices, escape or attempted escape, or injury caused to yourself or others, as a result of your being found guilty. If you choose to appeal, the restitution will be withdrawn from your youth banking account and placed in a "set aside" account pending final disposition of the appeals process. If you do not have sufficient funds in your youth banking account, your account will be frozen until the amount of the restitution is satisfied.

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☐ Amount of Restitution: \_\_\_\_\_☐ Restitution to be Assessed: \_\_\_\_\_☐ Amount Assessed: \_\_\_\_\_

Description of item, etc. to be assessed:

\_\_\_\_\_

☐ You waived your appearance at the Code of Conduct Committee hearing of \_\_\_\_\_.  
You have been assessed the above restitution.

Code of Conduct Committee Chairman: \_\_\_\_\_/\_\_\_\_\_ Date

Member: \_\_\_\_\_ Date: \_\_\_\_\_

Member: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_  
Youth's Signature Date\_\_\_\_\_/\_\_\_\_\_  
Witness (Representative/Advocate) Date

Original: Master Record  
Copy: Business Office  
Code of Conduct Office